## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 200Ú

Application or Docket Number 09/693/35

CLAIMS AS FILED - PART I (Column 1) (Column 2)								Small entity Type ( ) Of			other than R small entity		
TOTAL CLAIMS			16					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			/ minus 20=		<b>*</b>			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			∂ minus 3 =		*			X40=		OR	X80=		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+135=		OR	+270=		
* If	the difference	in column 1 is	less than ze	ro, ente	r "0" in c	'0" in column 2		TOTAL	355°	OR	TOTAL		
Claims as amended - Part II									- *	•	other than		
		(Column 1)	(Colur				) 31	SMALL ENTITY		OR	R SMALL ENTIT		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	T CL AIAA	<u> </u> =		X40=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)												-	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST (BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NOS	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ADME	Independent	*	Minus	***	T OL 410 A	=		X40=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)										_	7,001117 22		
AMENDMENT C	-	CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST ABER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ANNE	Independent	* ENTATION OF M	Minus	***	T CL A104	<u>                                     </u>		X40=		OR	X80=		
L	Limoirnese	'	OLITE UE!	CIADEIA	LAIN			+135=		OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."								TOTAL		OR	TOTAL ADDIT. FEE		
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

Application or Docket Number

CLAI	AS FILED (Colum		(Colum	nn 2)	SM	ALL EN		OR	OTHER SMALL E	
OTAL CLAIMS	Cold	rai 1)			T	RATE	FEE		RATE	FEE
	MIMAR	ER FILED	NUMBE	R EXTRA	ВА	SIC FEE	370.00	OR	BASIC FEE	740.00
OR OTAL CHARGEABLE CLA		ภูเกษร 20=				X\$ 9=		OR	X\$18=	
		- minus 3 = *		Y	-	X42=		OR	X84=	
IDEPENDENT CLAIMS					-				.200_	
					L	+140= //		OR	+280=	
If the difference in colum	on 1 is less that	n zero, ente	er "O" in oo	olumn 2 ,	7	OTAL		OR	TOTAL OTHER	THAN
CLAIMS	AS AMEND			(Oakama 2)	. 5	MALL E	ENTITY	OR		
(Colur CA REMA AFT	IMS · INING TER	HIG NU PREV	HEST MBER MOUSLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI TION/ FEE
Total * Sindependent *	Minus	PAI	D FOR	=		X\$ 9=	1	OR	X\$18=	h
Total * Ø	Minus	***	.3	= .	.  -	X42=		OR	X84=	
FIRST PRESENTATION	N OF MULTIPLE	DEPENDE	NT CLAIM	· 🔲	-		1	OR	000	
					L	+140=	<del>                                     </del>	-	TOTAL	-
·	• • •		•	•		DIT. FEE		Jou	ADDIT. FEE	<b></b>
	ımn 1)		lumn 2) GHEST	(Column 3)	1 г		ADDI-	7		ADD
	AIMS	N	JMBER VIOUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TION
m REM	TER			EXITA	] L		FEE	-1		<del>                                     </del>
m REM			ID FOR	=	1	X\$ 9=	FEE	OR	X\$18=	
REMUNICATION AFTER AMEN	TER IDMENT	PA		· · · · · ·		X\$ 9= X42=	FEE	OR	V04=	
m REM	TER IDMENT Minus Minus	PA state	ID FOR	=		X42=	FEE	OF	X84=	
REMARKA AFEN AMEN  Total *  Independent *	TER IDMENT Minus Minus	PA state	ID FOR	=		X42= +140=		OF	X84= +280=	AL.
REMARKA AFEN AMEN  Total *  Independent *	TER IDMENT Minus Minus	PA state	ID FOR	=		X42=		OF	X84= +280=	AL.
Total * Independent * FIRST PRESENTATIO	Minus Minus Minus Minus Minus Minus Minus Minus Minus	DEPENDE	ID FOR  ENT CLAIM	=		X42= +140=		OF OF	X84= +280=	AD
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Total *  Independent *  FIRST PRESENTATIO  (Col. Col. Col. Col. Col. Col. Col. Col.	Minus	CCC (CCC H	Olumn 2) IIGHEST IUMBER	(Column 3) PRESENT EXTRA		X42= +140= TOTAL DOIT. FEE	ADDI- TIONA	OF OF	X84= +280= TOT/ ADDIT. FE	AD TION
Total *  Independent *  FIRST PRESENTATIO  (Col. Col. Col. Col. Col. Col. Col. Col.	Minus	CCC HANDER PROPERTY OF THE PRO	olumn 2) IGHEST IUMBER EVIOUSLY AID FOR	= (Column 3)		X42= +140= TOTAL DOIT. FEE RATE X\$ 9=	ADDI- TIONA	OF OF	X84= +280= TOT/ ADDIT. FE	AD TION
Total *  Independent *  FIRST PRESENTATIO  (Col. Col. Col. Col. Col. Col. Col. Col.	Minus	CCC  (CCC  H  N  PR  PR  PR  S  AAA	olumn 2) IGHEST RUMBER EVIOUSLY AID FOR	Column 3 PRESENT EXTRA		X42= +140= TOTAL DOIT. FEE	ADDI- TIONA	OF OF	X84= +280= TOT/ADDIT. FE  RATE  X\$18-  X84=	AD TION